

**IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF ALABAMA
NORTHERN DIVISION**

THOMAS OTTER ADAMS (100612),)	
)	
Plaintiff,)	
)	
v.)	Case #: 2:06-cv-873-ID
)	
WARDEN GWENDOLYN MOSLEY,)	
Et al)	
Defendants.)	

RESPONSE TO THE COURT’S ORDER DATED JULY 25, 2008

Come now the Defendants, **Gwendolyn Mosley, Lewis Hulett, Joel Tew, Daron Fayson, and Angela Brown**, by and through the Attorney General for the State of Alabama, and hereby file the following documents in response to this Court’s order dated July 25, 2008:

1. Exhibit F – Items 1 through 9 requested by Inmate Adams
2. Exhibit G – Inmate Adams’ August 10, 2006 X-ray report
3. Exhibit H – Inmate Adams’ medical records for August 10-20, 2006.

Respectfully Submitted,

Troy King (KIN047)
Attorney General

/s/Bettie J. Carmack
Bettie J. Carmack (CAR-132)
Assistant Attorney General

CERTIFICATE OF SERVICE

I hereby certify that I have, this the 5th day of August, 2008, served a copy of the foregoing upon the Plaintiff, by placing same in the United States Mail, postage prepaid and properly addressed as follows:

**Inmate Thomas Otter Adams
AIS # 100612
Staton Correctional Facility
P. O. Box 56
Elmore, AL 36025**

/s/ Bettie J. Carmack
Bettie J. Carmack (CAR-132)
Assistant Attorney General
Office of the Attorney General
11 South Union Street
Montgomery, AL 36130
Telephone: (334) 353-5305
Facsimile: (334) 242-2433

EXHIBIT F

STATE OF ALABAMA
DEPARTMENT OF CORRECTIONS
INCIDENT REPORT

1. Institution: Easterling Correctional Facility		2. Date: 08/10/2006		3. Time: 9:00 AM		4. Incident Number: ECF 06-853		Class Code: C	
5. Location Where Incident Occurred: Segregation, Cell 5B-16					6. Type of Incident: #64-Possession of contraband.				
7. Time Incident Report 9:10 AM					8. Who Received Report: Sgt. Lewis Hulett <i>Sgt. Lewis Hulett</i>				
9. Victims:									
a. <u>N/A</u>					No. _____				
b. _____					No. _____				
c. _____					No. _____				
10. Suspects:									
a. Thomas Adams					No. W/100612				
b. _____					No. _____				
c. _____					No. _____				
d. _____					No. _____				
e. _____					No. _____				
11. Witnesses:									
a. <u>N/A</u>					No. _____				
b. _____					No. _____				
c. _____					No. _____				
d. _____					No. _____				
e. _____					No. _____				
f. _____					No. _____				
g. _____					No. _____				
PHYSICAL EVIDENCE:									
12. Type of Evidence									
<u>N/A</u>									
13. Description of Evidence:									
<u>N/A</u>									
14. Chain of Evidence:									
a. <u>N/A</u>									
b. _____									
c. _____									
d. _____									
e. _____									
15. Narrative Summary:									
<p>On August 10, 2006, at approximately 9:00 AM, Officers Joel Tew and Officer Fayson conducted a routine shakedown of cell 5B-16, which housed Inmates Thomas Adams, W/100612, and Gary Christopher, W/201921. During the shakedown Officer Tew found and confiscated four (4) pieces of razor blade, one (1)-double bladed pencil sharpener, one (1) state issued belt buckle, one (1) band aid, ten (10) rolls of string, one (1) box of used artist pastels (chalk crayons), three (3) pieces of a ruler, one (1) inmate made artist brush, and six (6) 600mg Lopid pills, from Inmate's Adams bed and living area. Officer Tew asked Inmate Adams if the items belonged to him. Inmate Adams stated, "Yea, all of that is mine." At approximately 9:10 AM, Officer Tew reported the incident to Sgt. Lewis Hulett. Officer Fayson carried the pills to the Health Care Unit to be identified. The pills were identified by Nurse Susie Bush as Lopid, which is prescribed to Inmate Adams. Nurse Bush disposed of the pills in the pharmacy sink. Inmate Adams remained in cell 5B-16 pending disciplinary action for R/V#64-Possession of contraband.</p> <p style="text-align: right;"><i>Joel Tew COI</i> Joel Tew, COI</p>									

Distribution: ORIGINAL AND ONE (1) COPY to Central I & I Division
COPY to Institutional File

COPY to Deputy Commissioner of Operations (Class A and B ONLY)
COPY to Central Records Office

ADOC Form 302-A - June 1, 2005

STATE OF ALABAMA
DEPARTMENT OF CORRECTIONS
INCIDENT REPORT

AUG 18 2006

(1)

1. Institution: Easterling Correctional Facility	2. Date: 08/10/2006	3. Time: 9:25 AM	4. Incident Number: ECF 06-867 Class Code: B
5. Location Where Incident Occurred: Segregation Lobby		6. Type of Incident: #56-Failure to obey a direct order of an ALDOC official; #29-Assault on an ALDOC official. (Use of Force)	
7. Time Incident Report 9:25 AM		8. Who Received Report: Sgt. Lewis Hulett <i>Sgt. Lewis Hulett</i>	
9. Victims:			
a. <u>N/A</u>		No. _____	
b. _____		No. _____	
c. _____		No. _____	
10. Suspects:			
a. <u>Thomas Adams</u>		No. <u>W/100612</u>	
b. _____		No. _____	
c. _____		No. _____	
d. _____		No. _____	
e. _____		No. _____	
11. Witnesses:			
a. <u>N/A</u>		No. _____	
b. _____		No. _____	
c. _____		No. _____	
d. _____		No. _____	
e. _____		No. _____	
f. _____		No. _____	
g. _____		No. _____	
PHYSICAL EVIDENCE:			
12. Type of Evidence <u>N/A</u>			
13. Description of Evidence: <u>N/A</u>			
14. Chain of Evidence:			
a. <u>N/A</u>			
b. _____			
c. _____			
d. _____			
e. _____			
15. Narrative Summary:			
<p>On August 10, 2006, Officer Daron Fayson and Officer Joel Tew were assigned as Segregation Rovers. At approximately 9:25 AM, Officer Fayson reported to Sgt. Lewis Hulett that Inmate Thomas Adams, W/100612, cell 5B-16, was having chest pains. At approximately 9:27 AM, Officer Fayson and Officer Angela Brown removed Inmate Adams from his cell and escorted him to the lobby. Sgt. Hulett notified the Health Care Unit and advised them to send a wheelchair to the Segregation Unit. At approximately 9:29 AM, the Health Care Unit inmate runner arrived at the Segregation Unit with the wheelchair. Sgt. Hulett pushed the wheelchair into the lobby. At approximately 9:30 AM, Officer Tew entered the Segregation Unit with the food cart. Sgt. Hulett instructed Officer Tew to assist Inmate Adams into the wheelchair so that he could be escorted to the Health Care Unit. Officer Tew placed the wheelchair in front of Inmate Adams and instructed him to get in the wheelchair. Inmate Adams kicked the wheelchair and stated, "Y'all ain't going to do anything for me. Y'all want me dead. Y'all are making a big deal out of some pastel pencils and some pills," in the presence of Sgt. Hulett and Officer Angela Brown. Officer Tew placed the wheelchair in front of Inmate Adams again and ordered him to sit in the wheelchair. Inmate Adams jumped up from the chair and began walking towards the exit door. Officer Tew grasped Inmate Adams' jumpsuit at his left arm area and ordered him to stop and sit in the wheelchair. Inmate Adams pulled away from Officer</p>			

Distribution: ORIGINAL AND ONE (1) COPY to Central I & I Division
COPY to Institutional File

COPY to Deputy Commissioner of Operations (Class A and B ONLY)
COPY to Central Records Office

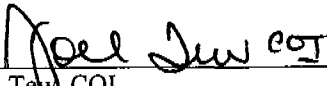
ADOC Form 302-A - June 1, 2005

16 AUG 2006

STATE OF ALABAMA
DEPARTMENT OF CORRECTIONS

①

INCIDENT REPORT/DUTY OFFICER REPORT CONTINUATION

Institution: Easterling Correctional Facility	Incident Number: ECF - 06-	Class Code: B
Date: August 10, 2006	Type of Incident: #29-Assault on an ALDOC official; #56-Failure to obey a direct order of an ALDOC official. (Use of Force)	
Narrative Summary (Continued) Page No.: 2		
<p>Tew. Officer Tew grasped Inmate Adams' right upper arm and directed him toward the wheelchair. Inmate Adams kicked the wheelchair and charged at Officer Tew, pushing him into the lobby wall. Officer Tew grasped Inmate Adams' upper body and placed Inmate Adams on the floor. Officer Tew, Officer Brown, and Sgt. Hulett assisted Inmate Adams to the wheelchair. Sgt. Hulett and Officer Tew escorted Inmate Adams to the Health Care Unit to be examined. At approximately 9:40 AM, Officer Tew was examined by Nurse Susie Bush and released back to duty at approximately 9:45 AM. At approximately 9:45 AM, Inmate Adams was examined by Nurse Debra Shehane and released back to Officer Tew and Sgt. Hulett at approximately 10:00 AM. Officer Tew and Sgt. Hulett escorted Inmate Adams back to the Segregation Unit and placed Inmate Adams back into his assigned cell (see attached medical charts). At approximately 12:00 PM, Sgt. Hulett completed a Duty Officer Report and faxed it to the appropriate officials (see attached Duty Officer Report). On August 11, 2006, Lt. Willie Bryant completed a Use of Force Investigation (see attached Use of Force Investigation sheet). Inmate Adams remained in Segregation pending disciplinary action for R/V#29- Assault on an ALDOC official and #56-Failure to obey a direct order on an ALDOC official.</p>		
 _____ Joel Tew COI		

(2)

USE OF FORCE INVESTIGATION SHEET

LIST BELOW PERSONNEL INVOLVED/ INTERVIEWED

Officer Joel Tew

Officer Angela Brown

Sgt. Lewis Hulett

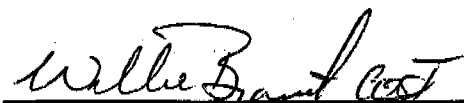
LIST BELOW INMATES INVOLVED/ INTERVIEWED

Thomas Adams, W/100612

FINDING: On August 10, 2006, Officer Joel Tew was assigned a Segregation Rover. At approximately 9:30 AM, Officer Tew instructed Inmate Thomas Adams, W/100612, to get out of the chair that he was sitting in in the lobby and to sit in the wheelchair that was in front of him. Inmate Adams was complaining of chest pains. Inmate Adams kicked the wheelchair and stated, "Y'all ain't going to do anything for me. Y'all want me dead. Y'all are making a big deal out of some pastel pencils and some pills." Officer Tew placed the wheelchair in front of Inmate Adams again and ordered him to get in the wheelchair. Inmate Adams jumped up from the chair and began walking towards the exit door. Officer Tew grasped Inmate Adams' jumpsuit at his left arm area and ordered Inmate Adams to stop and sit in the wheelchair. Inmate Adams pulled away from Officer Tew. Officer Tew grasped Inmate Adams' right upper arm and directed him toward the wheelchair. Inmate Adams kicked the wheelchair and charged Officer Tew, pushing him into the lobby wall. Officer Tew grasped Inmate Adams' upper body and placed Inmate Adams on the floor. Officer Tew, Officer Angela Brown, and Sgt. Lewis Hulett assisted Inmate Adams to the wheelchair. Sgt. Hulett and Officer Tew escorted Inmate Adams to the Health Care Unit in the wheelchair. Inmate Adams was examined and released back to Segregation. Officer Tew was examined and released back to duty with no injuries.

THE USE OF FORCE WAS JUSTIFIED:

to gain control of Inmate Adams and make him comply with the lawful order to sit in the wheelchair provided.



INVESTIGATING OFFICER'S SIGNATURE

3

Alabama Department of Corrections Duty Officer Report

Class Code _____

#56-Failure to obey a direct order of an ALDOC official (Use of Force)

Type of Incident: #29-Assault on an ALDOC official Institution: Easterling Corr. Facility

Victim(s): _____ AIS# _____ R/S _____ DOB _____

_____ AIS# _____ R/S _____ DOB _____

Suspect(s): Thomas Adams AIS# 100612 R/S W/M DOB 06/17/1952

_____ AIS# _____ R/S _____ DOB _____

_____ AIS# _____ R/S _____ DOB _____

Sentenced From: Calhoun County Date of Sentence: 11/01/2004

Offense(s): Robbery I X6 Length of Sentence: Life

Minimum Release Date: Life

Date: 08/10/06 Time: 9:30 AM Location: Segregation Lobby

Brief Narrative: On August 10, 2006, Officer Joel Tew was assigned duty as a Segregation Rover. At approximately 9:30 AM, Officer Tew instructed Inmate Thomas Adams, W/100612, to get out of the chair that he was sitting in the lobby and to sit in the wheel chair that was in front of him. Inmate Adams was complaining of chest pains. Inmate Adams kicked the wheel chair and stated, "Y'all ain't going to do anything for me. Y'all want me dead. Y'all are making a big deal out of some pastel pencils and some pills." Officer Tew placed the wheel chair in front of Inmate Adams again and ordered him to get in the wheel chair. Inmate Adams jumped up from the chair and began walking towards the exit door. Officer Tew grasped Inmate Adams' jumpsuit at his left arm area and ordered Inmate Adams to stop and sit in the wheel chair. Inmate Adams pulled away from Officer Tew. Officer Tew grasped Inmate Adams' right upper arm and directed him toward the wheel chair. Inmate Adams kicked the wheel chair and charged Officer Tew, pushing him into the lobby wall. Officer Tew grasped Inmate Adams' upper body and placed Inmate Adams on the floor. Officer Tew, Officer Angela Brown, and Sgt. Lewis Hulett assisted Inmate Adams to the wheel chair. Sgt. Hulett and Officer Tew escorted Inmate Adams to the Health Care Unit in the wheel chair. Inmate Adams was examined and released back to Segregation. Officer Tew was examined and released back to duty with no injuries.

(Use ADOC Form 302-B for Continuation of narrative)

Official Reporting: Lewis Hulett, COII Date: 08/10/06 Time: 12:00 PM

Receiver of Report: _____

Deputy Comm. of Operations: _____ Date: _____ Time: _____

Inst. Coordinator: _____ Date: _____ Time: _____

Investigations: _____ Date: _____ Time: _____

Public Information Officer: _____ Date: _____ Time: _____

Clear Day

(4)

Greene, Latrice (DOC)

From: Greene, Latrice (DOC)
Sent: Monday, October 02, 2006 4:57 PM
To: Maloy, Grace (DOC)
Cc: Mosley, Gwendolyn (DOC)
Subject: RE: Message

His Detention Notification form dated 6/21/2005 indicates that he was placed in Administrative Segregation pending R/V #62-Intentionally creating a security safety hazard (copy in file). He was reclassified for Administrative Segregation on 9/21/2005 (copy in file) because he was observed by several ALDOC employee publicly intimidating other inmates associated with the Native American Community. During the reclass inmate he called as witness "**Proclaimed him as their Leader**" and stated w/o him they could not continue their "good work". He had his Annual Progress Review 9/13/2006 and recommendation was no change to remain in Admin. Seg. due to the seriousness of the situation (His Leadership over other inmates) in Easterling's population and other Native American in other populations.

From: Maloy, Grace (DOC)
Sent: Monday, October 02, 2006 4:29 PM
To: Greene, Latrice (DOC)
Subject: FW: Message

Ms. Greene:

Please scroll down this email and respond. Thank you. Ms. Maloy

Grace Maloy
Secretary to Warden II Carter F. Davenport
Easterling Correctional Facility
200 Wallace Drive
Clio, Alabama 36017
(334) 397-4471 X 207

From: Mosley, Gwendolyn (DOC)
Sent: Monday, October 02, 2006 4:28 PM
To: Maloy, Grace (DOC)
Subject: RE: Message

Okay. Ms. Greene can tell you everything you want to know.

Gwen Mosley

10/2/2006

4

From: Maloy, Grace (DOC)
Sent: Monday, October 02, 2006 4:09 PM
To: Mosley, Gwendolyn (DOC)
Subject: RE: Message

He didn't say. He just asked me to check into it for him.

Grace Maloy
Secretary to Warden II Carter F. Davenport
Easterling Correctional Facility
200 Wallace Drive
Clio, Alabama 36017
(334) 397-4471 X 207

From: Mosley, Gwendolyn (DOC)
Sent: Monday, October 02, 2006 4:08 PM
To: Maloy, Grace (DOC)
Subject: RE: Message

Do you have to let Mr. Sharrod know about this via e-mail or can we tell him when he comes back to visit?

Gwen Mosley

From: Maloy, Grace (DOC)
Sent: Thursday, September 28, 2006 10:16 AM
To: Mosley, Gwendolyn (DOC); Davenport, Carter (DOC)
Cc: Segregation Office, Easterling (DOC)
Subject: Message

Mr. Sherrod asked about Inmate Thomas Adams, W/100612 - 5A-18.

Inmate Adams claims that he has been locked up since June of 2005, but never received any paperwork for that lock-up.

I looked in my disciplinary log back to the beginning of May 2005. I did not find any paperwork near that time.

He has a recent disciplinary for R/V#64, for possession of one Tylenol. I haven't looked back for the entire year.

Mr. Sherrod wants to know why his original charge was never held. I advised Mr. Sherrod that it is possible to be locked up "pending



investigation," and that he could have received disciplinaries while he was lock-up. Mr. Sherrod wants to know about the June 2005 - original reason for placement in SEG.

Grace Maloy
Secretary to Warden II Carter F. Davenport
Easterling Correctional Facility
200 Wallace Drive
Clio, Alabama 36017
(334) 397-4471 X 207



5

EMERGENCY

ADMISSION DATE 8/10/06		TIME 940 AM	ORIGINATING FACILITY Custerling <input type="checkbox"/> SIR <input type="checkbox"/> PDL <input type="checkbox"/> ESCAPEE <input type="checkbox"/>		<input type="checkbox"/> SICK CALL <input type="checkbox"/> EMERGENCY <input checked="" type="checkbox"/> OUTPATIENT	
ALLERGIES NKDA			CONDITION ON ADMISSION <input checked="" type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR <input type="checkbox"/> SHOCK <input type="checkbox"/> HEMORRHAGE <input type="checkbox"/> COMA			
VITAL SIGNS: TEMP 98.8		ORAL RECTAL	RESP. 16	PULSE 80	B/P 110/80	RECHECK IF SYSTOLIC <100> 50
NATURE OF INJURY OR ILLNESS S-DOC bodychart			ABRASION /// CONTUSION # BURN xx FRACTURE Z LACERATION / SUTURES			
			PROFILE RIGHT OR LEFT RIGHT OR LEFT			
PHYSICAL EXAMINATION O- Wlm Officer. A+ox3 Resp 2 ease Skin wld injury noted to body Denies any complaints			ORDERS / MEDICATIONS / IV FLUIDS 			
A-Bodychart per DOC			TIME BY			
P-No tx needed.						
DIAGNOSIS						
INSTRUCTIONS TO PATIENT						
DISCHARGE DATE 8/10/06		TIME 945 AM	RELEASE / TRANSFERRED TO <input checked="" type="checkbox"/> DOC <input type="checkbox"/> AMBULANCE <input type="checkbox"/>		CONDITION ON DISCHARGE <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> POOR <input type="checkbox"/> FAIR <input type="checkbox"/> CRITICAL	
NURSE'S SIGNATURE S. Bushnell		DATE 8/10	PHYSICIAN'S SIGNATURE		CONSULTATION	
INMATE NAME (LAST, FIRST, MIDDLE) Tew Joel COI			DOC# —	DOB 10/27/64	R/S Wlm	FAC. ECF



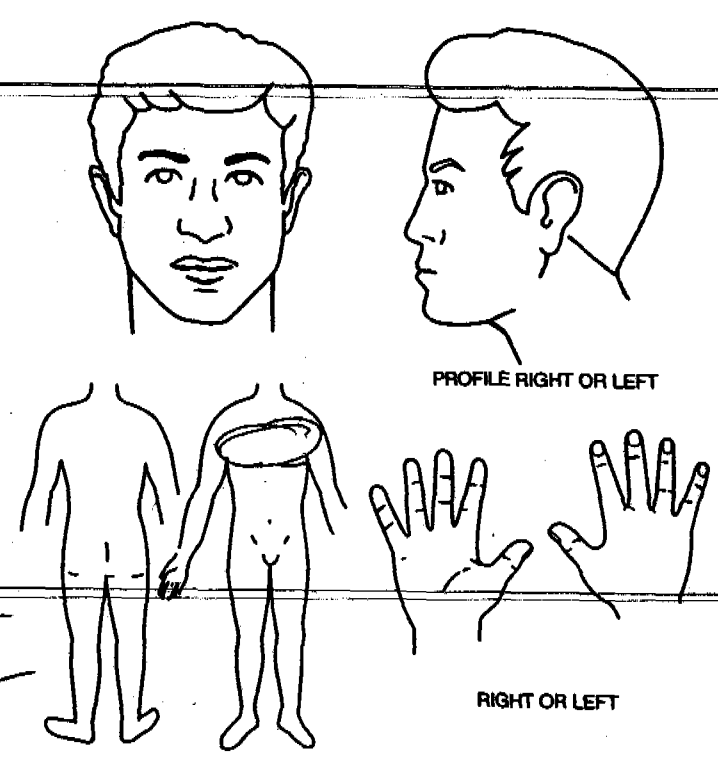
PRISON
HEALTH
SERVICES
INCORPORATED

EMERGENCY

5

ADMISSION DATE 8/10/06		TIME 9:50 AM	ORIGINATING FACILITY Easterling		<input type="checkbox"/> SICK CALL <input checked="" type="checkbox"/> EMERGENCY <input checked="" type="checkbox"/> OUTPATIENT	
ALLERGIES PEN Codine Bactrim ^{DS} Vagotec			CONDITION ON ADMISSION <input checked="" type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR <input type="checkbox"/> SHOCK <input type="checkbox"/> HEMORRHAGE <input type="checkbox"/> COMA			
VITAL SIGNS: TEMP 98.6		ORAL RECTAL	DOXYCYCLINE RESP. 24		PULSE 94	B/P 110/70
NATURE OF INJURY OR ILLNESS S. "I've got pain shooting across my chest." "I took a NTC 5 mins ago."			RECHECK IF SYSTOLIC <100> 50 ABRASION /// CONTUSION # BURN xx xx FRACTURE Z Z LACERATION / SUTURES			
PHYSICAL EXAMINATION O. Pt to HCU via wheelchair from Seg per Sgt Hewlett & officer New. Pt states he having chest pain. Pt A+0+3 Skn up to touch. Resp c. ease. no visible distress noted. Pt moaning & asking for a drink of water. Pt states he's alright now & just need a drink of water. Pt left HCU walking back to Seg. H. Health Maintenance			PROFILE RIGHT OR LEFT RIGHT OR LEFT			
			ORDERS / MEDICATIONS / IV FLUIDS TIME BY P. EKG done. MD w Site and EKG reviewed. NO orders received. Pt D/C'd back to Seg per MD — R Sh...			
DIAGNOSIS Chest pain (caused by NTC 3L x1) bc to seg, Rte free						
INSTRUCTIONS TO PATIENT No orders Return to Seg. Return if needed						
DISCHARGE DATE 8/10/06		TIME 10:00 AM	RELEASE / TRANSFERRED TO DOC		CONDITION ON DISCHARGE <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> POOR <input type="checkbox"/> FAIR <input type="checkbox"/> CRITICAL	
NURSE'S SIGNATURE Sh...		DATE 8/10/06	PHYSICIAN'S SIGNATURE A		DATE 8/10/06	
INMATE NAME (LAST, FIRST, MIDDLE) Adams Thomas			DOC# 100612		DOB W/m	R/S Easterling

EMERGENCY

ADMISSION DATE 8/10/06		TIME 9:15 AM	ORIGINATING FACILITY EMERGENCY		<input type="checkbox"/> SICK CALL <input type="checkbox"/> EMERGENCY <input checked="" type="checkbox"/> OUTPATIENT							
ALLERGIES Pen Codeine Bactrim Vagotac			CONDITION ON ADMISSION <input checked="" type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR <input type="checkbox"/> SHOCK <input type="checkbox"/> HEMORRHAGE <input type="checkbox"/> COMA									
VITAL SIGNS: TEMP 98.6		ORAL RECTAL	RESP. 24	PULSE 94	B/P 110/70	RECHECK IF SYSTOLIC <100> 50						
NATURE OF INJURY OR ILLNESS S. "I've got pain shooting across my chest. I took a NTC 5 mins ago."			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>ABRASION ///</td> <td>CONTUSION #</td> <td>BURN <input checked="" type="checkbox"/> <input checked="" type="checkbox"/></td> <td>FRACTURE <input checked="" type="checkbox"/> <input checked="" type="checkbox"/></td> <td>LACERATION / SUTURES</td> </tr> </table>				ABRASION ///	CONTUSION #	BURN <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	FRACTURE <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	LACERATION / SUTURES	
ABRASION ///	CONTUSION #	BURN <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	FRACTURE <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	LACERATION / SUTURES								
			 <p style="text-align: right;">PROFILE RIGHT OR LEFT</p> <p style="text-align: right;">RIGHT OR LEFT</p>									
PHYSICAL EXAMINATION O. Pt. to HCU via wheelchair from Seg per Sgt Hewlett & Officer Hew. Pt. States he having chest pain. Pt AX+3 Skn up to touch. Resp c. ease. No visible distress noted. Pt Moaning & asking for a drink of water. Pt States he's alright now he just need a drink of water. Pt left HCU walking back to Seg.			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>ORDERS / MEDICATIONS / IV FLUIDS</td> <td>TIME</td> <td>BY</td> </tr> <tr> <td>P. EKG done. MD @ Site and EKG reviewed. NO orders relieved. Pt D/C'd back to Seg per MD.</td> <td></td> <td>R. Shurt</td> </tr> </table>				ORDERS / MEDICATIONS / IV FLUIDS	TIME	BY	P. EKG done. MD @ Site and EKG reviewed. NO orders relieved. Pt D/C'd back to Seg per MD.		R. Shurt
ORDERS / MEDICATIONS / IV FLUIDS	TIME	BY										
P. EKG done. MD @ Site and EKG reviewed. NO orders relieved. Pt D/C'd back to Seg per MD.		R. Shurt										
DIAGNOSIS Heart br (and by EKG SL x1) bc to seg, etc and												
INSTRUCTIONS TO PATIENT Orders Return to Seg. Return if needed												
DISCHARGE DATE 8/10/06		TIME 10:00 AM	RELEASE / TRANSFERRED TO DOC		CONDITION ON DISCHARGE <input checked="" type="checkbox"/> SATISFACTORY <input type="checkbox"/> POOR <input type="checkbox"/> FAIR <input type="checkbox"/> CRITICAL							
NURSE'S SIGNATURE [Signature]		DATE 8/10/06	PHYSICIAN'S SIGNATURE [Signature]		CONSULTATION							
INMATE NAME (LAST, FIRST, MIDDLE) Adams Thomas			DOC# 100612	DOB	R/S W/m	FAC. EMERGENCY						

EMERGENCY

ADMISSION DATE 8 / 10 / 2006		TIME 4:15 PM	ORIGINATING FACILITY <input type="checkbox"/> SIR <input type="checkbox"/> PDL <input type="checkbox"/> ESCAPEE <input type="checkbox"/>		<input type="checkbox"/> SICK CALL <input type="checkbox"/> EMERGENCY <input type="checkbox"/> OUTPATIENT																			
ALLERGIES Penicillin - Codeine WT. 178			CONDITION ON ADMISSION <input checked="" type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR <input type="checkbox"/> SHOCK <input type="checkbox"/> HEMORRHAGE <input type="checkbox"/> COMA																					
VITAL SIGNS: TEMP 97		ORAL RECTAL	RESP. 16	02 JRS 98 PULSE 83	B/P 120/82	RECHECK IF SYSTOLIC <100> 50																		
NATURE OF INJURY OR ILLNESS 5 - TOOK ME OUT OF CELL - FIGHT WITH WIC - Officer Threw me on the Floor hurt my wrist and back hurts. Chest hurts 0 - A lot of bruising X's - Arm/leg in HANDCUFFS - Escorted by Sgt Hallett Officer Downer RT Wrist Area had approx 3 in "Red mark" 1" width middle of RT Area 1/2" on each end has a tiny scratch in middle of wrist no swelling - RT Lower Forearm Above Wrist has some swelling Able to move fingers PHYSICAL EXAMINATION Back and forth. NO MARKS on back or RT wrist - Forearm has RED mark approx 3 inches lower shoulder Area then almost shape of Arrow at bottom - NO bruising or swelling AT back Area NO other MARKS on body. STATES the only thing bothering him now is BACK is bothering him NO SOB - NO Cyanosis - NO Clonus AT present A - Doc says Chat I - Tylenol - X - Lay F/C Doc			<div style="display: flex; justify-content: space-around;"> <div> <p>ABRASION ///</p> <p>CONTUSION #</p> <p>BURN xx</p> <p>FRACTURE Z</p> <p>LACERATION /</p> <p>SUTURES</p> </div> <div> <p>PROFILE RIGHT OR LEFT</p> <p>RIGHT OR LEFT</p> </div> </div>																					
DIAGNOSIS			<table border="1"> <thead> <tr> <th>ORDERS / MEDICATIONS / IV FLUIDS</th> <th>TIME</th> <th>BY</th> </tr> </thead> <tbody> <tr> <td>Tylenol 325mg X 2 PRN</td> <td>4:35 PM</td> <td>DR</td> </tr> <tr> <td>BID X 2 days</td> <td></td> <td></td> </tr> <tr> <td>Per Doctor</td> <td></td> <td></td> </tr> <tr> <td>X - Rtg RT Forearm / DR Maly /</td> <td></td> <td></td> </tr> <tr> <td>D. Brown /</td> <td></td> <td></td> </tr> </tbody> </table>				ORDERS / MEDICATIONS / IV FLUIDS	TIME	BY	Tylenol 325mg X 2 PRN	4:35 PM	DR	BID X 2 days			Per Doctor			X - Rtg RT Forearm / DR Maly /			D. Brown /		
ORDERS / MEDICATIONS / IV FLUIDS	TIME	BY																						
Tylenol 325mg X 2 PRN	4:35 PM	DR																						
BID X 2 days																								
Per Doctor																								
X - Rtg RT Forearm / DR Maly /																								
D. Brown /																								
INSTRUCTIONS TO PATIENT																								
DISCHARGE DATE 8 / 10 / 2006		TIME 4:40 PM	RELEASE / TRANSFERRED TO 8-10-2006		<input checked="" type="checkbox"/> DOC 5-2 <input type="checkbox"/> AMBULANCE <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> POOR <input type="checkbox"/> FAIR <input type="checkbox"/> CRITICAL																			
NURSE'S SIGNATURE [Signature]		DATE 8-10-2006	PHYSICIAN'S SIGNATURE [Signature]		CONSULTATION																			
INMATE NAME (LAST, FIRST, MIDDLE) Adams-Thomas			DOC# 100612	DOB 6-17-52	R/S W/M	FAC. EAS																		



SPECIAL NEEDS COMMUNICATION FORM

#7

Date: 8/11/06To: DocFrom: PHSInmate Name: Adams Thomas ID#: 100612

The following action is recommended for medical reasons:

1. House in _____
2. Medical Isolation _____
3. Work restrictions _____
4. May have extra _____ until _____
5. Other _____

Comments:

Allow Pt to have Splint
for (R) WRIST X 2 weeks
8/11/06 - 8/25/06

Date: 8/11/06 MD Signature: UODR Darbouze / DShen Time: 940 AMX Thomas Adams

118



DEPARTMENT OF CORRECTIONS

RECEIPT OF MEDICAL EQUIPMENT/APPLIANCE FORM

I, Adams Thomas
(Print Name)100612
(Doc#)

I acknowledge receipt of the following medical equipment or appliance:

- () Splint
() Eyeglasses
() Dentures
() Prosthesis
() Wheelchair
() Cane
() Crutches
(☒) Other

describe _____

describe Wrist Brace

I acknowledge that the equipment/appliance is functional for my use.

I also acknowledge the equipment/appliance is in good working condition.

[Signature]
(Inmate)8/11/06
(Date)[Signature]
(Witness)8/11/06
(Date)

INMATE NAME (LAST, FIRST, MIDDLE)

Adams Thomas

DOC#

100612

DOB

6/17/52

R/S

W/M

FAC.

Easterbrook

#9



SPECIAL NEEDS COMMUNICATION FORM

Date: 8-10-2006To: DocFrom: HCUInmate Name: Adan - T Honds ID#: 100612

The following action is recommended for medical reasons:

1. House in _____
2. Medical Isolation _____
3. Work restrictions _____
4. May have extra _____ until _____
5. Other _____

Comments:

MAY have ICE for WAIT RT 8-10-2006 until A.M.Date: 8-10-2006 MD Signature: Dr. Page / D. Anderson Time: 4:35 PM

EXHIBIT G

DEPARTMENT OF CORRECTIONS

Name: Adams- Thomas

RADIOLOGY SERVICES REQUEST AND REPORT

State ID No.: 100612DOB: 6-17-52INSTITUTION: EastRace: W/MSex: M

NOTE: PERTINENT CLINICAL INFORMATION AND TENTATIVE DIAGNOSIS MUST BE PROVIDED FOR X-RAY EXAMINATION TO BE PERFORMED

Requesting Physician/PA/NP

Date of request

Time of request

Routine

Priority

Transportation or special needs

Darby8-10-2006

HISTORY/DIAGNOSIS:

Hurt LT Forearm

X-RAY REQUEST

ABDOMEN/KID	FINGERS	NAVICULAR VIEW	SOFT TISSUE STUDIES
ACROMIO-CLAVICULAR JOINTS (W/O WEIGHT)	FOOT	ORBITS	STERNUM
ANKLE	HAND	OS CALCS (HEEL)	TEMPORO-MANDIBULAR JOINTS
CERVICAL SPINE	HIP	PELVIS	THORACIC SPINE
CHEST PA / LATERAL	HUMERUS	RADIUS/ULNA <u>(R)</u>	TIBIA/FIBULA
COCKITX	KNEE	KIDS	TOES
ONE DOWN BELL TURCICA	LUMBAR SPINE	SACRO-ILIAC JOINTS	WRIST
ELBOW	MANDIBLE	SCAPULA	ZYGOMA
FACIAL BONES	MAXILLA	SHOULDER	ZYGOMATIC ARCH
FEMUR	NASAL BONES	SKULL	

REPORT

Adams

RIGHT FOREARM: The examination shows no evidence of recent fracture or other significant bony abnormality.

IMPRESSION: NEGATIVE STUDY.

LUMBAR SPINE: There is slight disc space narrowing identified at L4-L5 and L5-S1. Mild hypertrophic change is noted at L4-L5. The vertebral bodies maintain their normal height.

OPINION: Mild disc space narrowing lower lumbar spine.

RIGHT RIB DETAIL: A definite rib fracture is not detected. If symptoms persist, follow up would be recommended.

D & T: 08-14-06 Thomas J. Payne, III, M.D./dc Board Certified Radiologist (Signature on file)

X-RAY TECHNOLOGIST'S NAME (PRINT)

X-RAY TECHNOLOGIST'S SIGNATURE

DATE, TIME EXAM PERFORMED

RADIOLOGIST'S NAME (PRINT)

RADIOLOGIST'S SIGNATURE

DATE SIGNED

EXHIBIT H

Facility Name: Easterling Correctional Facility		Month/Year of Charting: 08/06	
Prozac 20MG Cap 60.00 Take 2 capsule(s) by mouth daily		Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	
Start Date: 07-10-2006 Stop Date: 08-08-2006		Prescriber: Robbins, M. RX #: 251709171	
Vistaril 50MG Cap 60.00 Take 2 capsule(s) by mouth daily at 9:00 p.m.		Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	
Start Date: 07-14-2006 Stop Date: 09-17-2006		Prescriber: Banerjee MHM, S. RX #: 251725176	
[Redacted] [Redacted] [Redacted]		Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	
Start Date: 05-12-2006 Stop Date: 08-09-2006		Prescriber: Darbouze, Jean RX #: 251507973	
[Redacted] Take one half (1/2) of [Redacted] mg by mouth daily		Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	
Start Date: 05-12-2006 Stop Date: 08-09-2006		Prescriber: Darbouze, Jean RX #: 251507982	
[Redacted] [Redacted]		Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	
Start Date: 07-12-2006 Stop Date: 08-10-2006		Prescriber: Darbouze, Jean RX #: 251714648	
Planix 75mg qd X 30 days		Hour 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	
Start Date: 7/30/06 Stop Date: 8/30/06		Prescriber: Darbouze RX #:	
Diagnosis Allergies PCN Vasotec Housing Unit: Population Patient ID Number: 100612 Patient Name: Adams, Thomas		Nurse's Signature Initial Date of Birth: 06-17-1952	
Documentation Codes		1. Discontinued Order 2. Refused 3. Patient out of facility 4. Charted in Error 5. Lock Down 6. Self Administered 7. Medication out of Stock 8. Medication Held 9. No Show 10. Other	

Facility Name: <u>Leicester Ins</u>		Month/Year of Charting:																																																																										
		Hour	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31																																											
Tylenol 650mg PO BID x 2 days		NA																																																																										
		4P																																																																										
		Start Date: <u>8-10-06</u>															Prescriber: <u>Darbyne</u>																																																											
		Stop Date: <u>8-12-06</u>															RX #:																																																											
Tylenol 1gram t.i.d PRN x 14 days		NA																																																																										
		4P																																																																										
		Start Date: <u>8/11/06</u>															Prescriber: <u>Darbyne</u>																																																											
		Stop Date: <u>8/25/06</u>															RX #:																																																											
Flexeril 1mg t.i.d PRN x 7 days		NA																																																																										
		4P																																																																										
		Start Date: <u>8/11/06</u>															Prescriber: <u>Darbyne</u>																																																											
		Stop Date: <u>8/18/06</u>															RX #:																																																											
Prozac 40mg P.O. q 9 pm x 90 days		NA																																																																										
		4P																																																																										
		Start Date: <u>8/16/06</u>															Prescriber: <u>Banejee</u>																																																											
		Stop Date: <u>11/15/06</u>															RX #:																																																											
Vistaril 100mg P.O. q 9 pm x 90 days		NA																																																																										
		4P																																																																										
		Start Date: <u>8/16/06</u>															Prescriber: <u>Banejee</u>																																																											
		Stop Date: <u>11/15/06</u>															RX #:																																																											
Zantac 150mg P.O. q 9 pm x 90 days		NA																																																																										
		4P																																																																										
		Start Date: <u>8/16/06</u>															Prescriber: <u>Banejee</u>																																																											
		Stop Date: <u>11/15/06</u>															RX #:																																																											
Diagnosis		Nurse's Signature															Initial															Nurse's Signature															Initial															Documentation Codes														
Allergies <u>Penicillin</u>		<u>MM</u>															<u>4</u>															<u>NA</u>															<u>NA</u>															1. Discontinued Order 2. Refused 3. Patient out of facility 4. Charted in Error 5. Lock Down 6. Self Administered 7. Medication out of Stock 8. Medication Held 9. No Show 10. Other														
Housing Unit:																																																																												
Patient ID Number: <u>100612</u>																																																																												
Patient Name: <u>Adams, Thomas</u>																																																														Date of Birth: <u>6-17-52</u>														

Facility Name: <u>Easterly</u>	Month/Year of Charting: <u>8/00</u>																																		
Hour	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30					
ASA 325y \dot{p} po qd x 90d	<div> <div>Start Date: <u>9-25-06</u></div> <div>Stop Date: <u>10-25-06</u></div> <div>Prescriber: <u>Danbrou</u></div> <div>RX #:</div> </div>																																		
Mevacor 40mg po qpm x 90d	<div> <div>Start Date: <u>7-25-06</u></div> <div>Stop Date: <u>10-25-06</u></div> <div>Prescriber: <u>Danbrou</u></div> <div>RX #:</div> </div>																																		
Lopressor 30mg po bid x 90d	<div> <div>Start Date: <u>9-25-06</u></div> <div>Stop Date: <u>10-25-06</u></div> <div>Prescriber: <u>Danbrou</u></div> <div>RX #:</div> </div>																																		
Lopid 600mg bid x 90d	<div> <div>Start Date: <u>7-25-06</u></div> <div>Stop Date: <u>10-25-06</u></div> <div>Prescriber: <u>Danbrou</u></div> <div>RX #:</div> </div>																																		
Plavix 75mg po qd x 30d	[REDACTED]																																		
Nitro 0.4g SL PRN x 90d	<div> <div>Start Date: <u>7-25-06</u></div> <div>Stop Date: <u>8-25 10-25-06</u></div> <div>Prescriber: <u>Danbrou</u></div> <div>RX #:</div> </div>																																		
Diagnosis	Nurse's Signature					Initial					Nurse's Signature					Initial					Documentation Codes														
Allergies <u>Rx VasoTec</u>	<u>MM</u>					<u>M</u>					<u>Clancian</u>					<u>C</u>					1. Discontinued Order														
<u>Bactrim Dosexycline</u>	<u>SM</u>					<u>J</u>					<u>He</u>					<u>d</u>					2. Refused														
Housing Unit:																					3. Patient out of facility														
Patient ID Number:																					4. Charted in Error														
Patient Name:																					5. Lock Down														
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																					7. Medication out of Stock														
																					8. Medication Held														
																					9. No Show														
																					10. Other														
Adams Thomas	<u>I</u>																									Date of Birth: <u>6-17-52</u>									